

DISABILITY SUPPORT AND ACCOMMODATIONS
HUMBOLDT STATE UNIVERSITY

Report Number 02-39
January 22, 2003

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ABBREVIATIONS

AA	Academic Affairs
AAES	Academic Affairs Educational Support
AB	Assembly Bill
ADA	Americans with Disabilities Act
ADEC	Assistive Device Equipment Committee
BP	Business Policy
CAHSS	College of Arts, Humanities, and Social Services
CFR	Code of Federal Regulations
CNRS	College of Natural Resources and Sciences
CO	Chancellor's Office
CSU	California State University
DASC	Disabled Access Sub-Committee
DSA	Disability Support and Accommodations
EE	Extended Education
EO	Executive Order
S.A.F.E.	Survival Actions for Emergencies
SAM	State Administrative Manual
SDRC	Student Disability Resource Center
TDD	Telecommunication Devices for the Deaf
UC	University of California

INTRODUCTION

PURPOSE

Our overall audit objective was to ascertain the effectiveness of existing policies and procedures related to the administration of the disability support and accommodations (DSA) program and to determine the adequacy of controls over the related processes to ensure compliance with relevant governmental regulations, Trustee policy, Office of the Chancellor directives, and campus procedures.

Within the overall audit, specific goals included making a determination as to whether:

- ▶ Administration and management of the DSA program provide effective internal control; clear lines of organizational authority; delegations of authority; formation of an Advisory Committee on Services to Students with Disabilities; and documented policies and procedures.
- ▶ The adequacy of and satisfaction with the DSA program are consistently monitored and assessed.
- ▶ Campus notification and grievance processes ensure appropriate compliance with regulatory requirements and timely and adequate resolution of noted disability-related issues.
- ▶ Persons and campus areas providing disabled student services possess the necessary qualifications and are appropriately trained and aware of their roles and responsibilities.
- ▶ Reasonable access and accommodations are provided to applicants and employees in compliance with Title I of the Americans with Disabilities Act (ADA), and student disability services comply with state law and California State University (CSU) and campus policies.
- ▶ Verification of disability is timely and adequately performed, and appropriate documentation is provided in compliance with CSU and campus policies.
- ▶ Disability records and information are properly maintained, safeguarded, and retained in accordance with state and federal regulations and CSU policy.
- ▶ Campus programs, services, and activities are readily accessible to all persons, and adaptive aids and other equipment are properly maintained and safeguarded.
- ▶ Campus disaster plans include evacuation procedures for disabled persons.
- ▶ Budgeting procedures adequately address program funding and ensure effective accounting and management control, and grant funds are administered in compliance with sponsor agreements.
- ▶ Chargebacks for disability support services are complete, accurate, valued properly, and processed timely, and credit is received.

SCOPE AND METHODOLOGY

This review emphasized, but was not limited to, compliance with state and federal laws, Board of Trustee policies, and Office of the Chancellor and campus policies, letters, and directives. July 2000 to June 2002 was the primary period of review.

We focused primarily upon internal, administrative, compliance, and operational controls over the management of the DSA program. Specifically, we reviewed and tested policies, procedures, and processes for:

- ▶ Monitoring the quality and effectiveness of campus DSA services.
- ▶ Soliciting and resolving student complaints and grievances relating to programmatic, physical, and other accessibility issues.
- ▶ Hiring DSA program staff and campus-wide training practices.
- ▶ Providing reasonable access and accommodations to applicants and employees.
- ▶ Verifying disabilities and providing (or declining) student disability support services.
- ▶ Maintaining and protecting disability information, including data in automated systems.
- ▶ Providing programs, services, and activities that are readily accessible to disabled individuals.
- ▶ Administering program and grant funds for disability support and other related services.
- ▶ Authorizing and processing expenditures of program funds that include, but are not limited to, grant awards, miscellaneous revenues, and petty cash.
- ▶ Valuing, processing, and collecting chargebacks for DSA services provided to self-supporting operations.
- ▶ Recording, safeguarding, and maintaining inventory for adaptive aids and equipment.

BACKGROUND

As a result of a systemwide risk assessment conducted by the Office of the University Auditor during the last quarter of 1999, the Board of Trustees, at its January 2002 meeting, directed that *Disability Support and Accommodations* be reviewed.

The proposed scope of the audit as presented in Attachment B, Audit Item 2 of the January 29-30, 2002, meeting of the Committee on Audit stated that the review would include all CSU programs for disabled employees, students, and visitors including accessibility of facilities, provision of enabling supportive services and use of adaptive technologies. Potential impacts include excessive costs, adverse publicity, inadequate accommodations and services, legal liabilities, and regulatory fines and sanctions. A related audit, *Handicapped Access*, was performed in 1988.

Beginning in the early 1970s, both the federal government and the state of California adopted laws that had far-reaching effects on improving services to students with disabilities and on the availability of these services at the postsecondary level. In 1973, Congress adopted the Federal Rehabilitation Act ensuring equal opportunity for persons with disabilities in the fields of employment and education and prohibiting discrimination on the basis of disability by any agency, including educational institutions that receive federal funds. In June 1977, the federal government issued regulations implementing Section 504 of the Rehabilitation Act of 1973. In response to Section 504 regulations, CSU campuses prepared self-evaluations that identified steps needed to ensure that students with disabilities had equal access to educational opportunities. In March 1980 and in response to the 1979 Budget Act, CSU also developed a policy statement that formalized the objectives of the Disabled Students Program to increase the enrollment of students with disabilities in the total student population and to facilitate their access to all educational programs. The *Policy for the Provision of Services to Students with Disabilities* detailed program goals and objectives, definitions of disabilities, and support services to be offered. The policy became the basis from which campus programs were developed and justified enrollment and funding requests. In 1980, the CSU Systemwide Advisory Committee on Services to Students with Disabilities was also established.

In 1989, the CSU revised the 1980 policy statement and incorporated disability services identified in Assembly Bill (AB) 746 into the new *Policy for the Provision of Services to Students with Disabilities*. In 1990, the federal government reinforced its commitment to individuals with disabilities by enacting the ADA. The ADA reaffirmed Section 504 of the Rehabilitation Act of 1973 regulations and extended the discrimination prohibition beyond the campus to businesses and organizations that did not receive federal funds. Additionally, the ADA detailed additional criteria in the areas of employment, new construction or renovation, transportation, and telecommunications. The ADA also required the appointment of an ADA coordinator and the development of a self-evaluation and transition plan to itemize compliance steps.

In November 1995, the Bureau of State Audits issued a report, *CSU and UC: Campuses Generally Provide Access for Students with Disabilities*, including four CSU and two University of California (UC) campuses. The report noted that overall, the chancellor's office (CO) of the CSU had developed adequate policies requiring respective campuses to comply with provisions of the ADA; all four campuses had developed adequate guidelines to meet the needs of, and provide access to, their students with disabilities; and students at all four campuses indicated a high level of satisfaction with services provided by their respective campuses. Based on the audit results, the Bureau of State Audits recommended that the CO increase campus awareness of ADA requirements by instructing its campuses to provide training classes or seminars for faculty and staff, and address conditions and remove barriers that may deny access to its students. The CO concurred with the findings and most of the recommendations in the report.

Disabled student enrollment at the CSU has grown from 3,760 to 9,699 students (a 158% increase) from fall 1980 to fall 2001. Additionally, the number of students by disability category (visual limitation, communication disability, deafness, mobility limitation, learning disability, and other functional limitations) changed dramatically reflecting a growth of students with certain disabilities seeking services from campus disability support services programs. Most notably, the number of students with specific learning disabilities increased from 124 in fall 1980 (3.3% of students served) to 4,078 (42% of students served) in fall 2001.

Throughout this report, we will refer to the program as disability support and accommodations (DSA). At Humboldt State University, the student disability resource center (SDRC) and other responsible individuals administer the DSA program.

OPINION

We visited the Humboldt State University campus from June 17, 2002, through July 26, 2002, and audited the procedures in effect at that time.

In our opinion, the overall administration and management of the DSA program needed improvement. Through coordinated efforts, disabled students were provided reasonable academic support services that included proactive counseling and assistive technology. However, our review disclosed certain aspects of the DSA program that required immediate attention. Specifically, the campus did not maintain adequate control over the Advisory Committee on Services to Students with Disabilities, which included, but was not limited to, holding regular meetings and resolving physical access issues that were raised by the committee; important policies and procedures were not written; computer labs and websites were not fully accessible by all persons; and adequate controls were not in place over faculty and staff training, including contract instructors for the extended education (EE) program. Most notably were issues with signage and campus maps, parking, telephones, and ADA compliance by auxiliary organizations, as responsibility and accountability for these areas was not clearly defined and documented. These and other areas in need of improvement are referenced in the executive summary.

EXECUTIVE SUMMARY

The purpose of this section is to provide management with an overview of conditions requiring their attention. Areas of review not mentioned in this section were found to be satisfactory. Numbers in brackets [] refer to page numbers in the report.

PROGRAM ADMINISTRATION [8]

ADVISORY COMMITTEE ON SERVICES TO STUDENTS WITH DISABILITIES [8]

The Disabled Access Sub-Committee (DASC) had not met for the past two years, and institutional responsibility and authority had not been defined for the newly formed Advisory Committee on Services to Students with Disabilities. Maintaining an active and effective committee ensures that campus programs, services, and activities will be accessible to all individuals.

DELEGATIONS OF AUTHORITY [9]

Delegations of authority had not been documented for the student disability resource center (SDRC) director to approve the provision of services to disabled individuals and to the Americans with Disabilities Act (ADA) coordinator to perform assigned duties. Documenting delegations of authority enhances internal control.

ADMINISTRATION OF MINOR CAPITAL OUTLAY FUNDS [10]

Procedures had not been established to ensure executive campus management approval of minor capital outlay fund requests. Obtaining appropriate approvals enhances internal control and reduces the risk of noncompliance with California State University (CSU), state, and federal regulations, negative publicity, and potential lawsuits.

POLICIES AND PROCEDURES [11]

Comprehensive policies and procedures were not in place for certain aspects of the disability support and accommodations (DSA) program. Proper development, documentation, and communication of written procedures improve internal control and ensure that disabled students are properly served.

PROGRAM AND PHYSICAL ACCESSIBILITY [12]

COMPUTER LABS AND WEBSITES [12]

Campus computer labs, general computing areas, and websites were not fully accessible by all persons. Providing access to campus programs, services, activities, and communications reduces the risk of regulatory scrutiny, potential lawsuits, and negative publicity.

SIGNAGE AND CAMPUS MAPS [14]

Effective signage was not always in place, and a comprehensive campus map that included all accessible paths of travel and other accommodations for disabled persons had not been developed. Providing sufficient signage and comprehensive campus maps reduces the risk that campus programs, services, activities, and communications will not be fully accessible to all persons.

TELEPHONES [16]

Responsibility for determining the sufficiency and placement of Telecommunication Devices for the Deaf (TDD) telephones had not been defined and documented. Providing sufficient communication reduces the risk that campus programs, services, activities, and communications will not be fully accessible to all persons.

PARKING [16]

The campus methodology for implementing accessible parking stalls based on student and faculty need had not been officially approved and documented. Providing sufficient handicap parking reduces the risk that campus programs, services, and activities will not be fully accessible to all persons.

UNIVERSITY CENTER [17]

University center programs, services, and activities were not fully accessible. Providing access to all campus programs, services, activities, and communications reduces the risk of regulatory scrutiny, potential lawsuits, and negative publicity.

THE VAN DUZER THEATRE [18]

Certain accessibility issues were noted in the Van Duzer Theatre that required improvement. Adequate control over campus programs reduces the risk of misunderstandings, regulatory scrutiny, potential lawsuits, and negative publicity.

DISASTER EVACUATION PLANS [20]

Controls to ensure evacuation of disabled persons from the campus needed improvement. Sufficient controls over disaster evacuation processes reduce the risk of injury and potential liability to the campus.

PERSONNEL QUALIFICATIONS AND TRAINING [21]

ADA TRAINING PLAN [21]

The campus had not developed an ADA training plan for faculty, staff, and other individuals that work with disabled persons, and responsibility for this area had not been defined. An effective training plan helps ensure compliance with federal, state, and CSU policies.

CONTRACT INSTRUCTORS [22]

Procedures had not been established to inform contract instructors of their ADA compliance responsibilities. Adequate control over contractor services reduces the risk of noncompliance with CSU policies and state and federal regulations regarding disabled persons.

EMPLOYEE ACCOMMODATIONS [23]

The administration of the campus employee accommodation program was in need of improvement. Adequate control over the administration of the employee accommodation program reduces the risk of potential lawsuits, negative publicity, and poor employee morale.

DISABILITY VERIFICATION AND PROVISION OF SERVICES [24]

Student disability files were not complete or properly documented. Adequate control over disability information reduces campus liability due to the provision of inappropriate services.

FISCAL ADMINISTRATION [25]

EQUIPMENT CONTROL [25]

The SDRC did not maintain an inventory record of tape recorders and other equipment loaned to students. Sufficient controls over equipment reduce exposure to loss and/or misuse of state property.

OBSERVATIONS, RECOMMENDATIONS, AND CAMPUS RESPONSES

PROGRAM ADMINISTRATION

ADVISORY COMMITTEE ON SERVICES TO STUDENTS WITH DISABILITIES

The Disabled Access Sub-Committee (DASC) had not met for the past two years, and institutional responsibility and authority had not been defined for the newly formed Advisory Committee on Services to Students with Disabilities.

We noted that:

- ▶ Although the campus recently established an Advisory Committee on Services to Students with Disabilities, the former DASC had been inactive for the past two years. Consequently, and due to a lack of delegated authority to resolve programmatic and physical access issues that were raised via committee meetings, certain issues were outstanding since early 1999 without formal plans for resolution.
- ▶ Institutional responsibility and authority for the new Advisory Committee on Services to Students with Disabilities had not been defined.

California State University (CSU) directive Academic Affairs Educational Support (AAES) 89-07/Business Policy (BP) 89-08, *Policy for the Provision of Services to Students with Disabilities*, dated January 9, 1989, states that each campus shall establish an Advisory Committee on Services to Students with Disabilities. CSU directive Academic Affairs (AA) 2002-35, *Policy for the Provision of Services to Students with Disabilities*, dated July 1, 2002, superseded this directive.

State Administrative Manual (SAM) §20050 states that existence of one or more of the following danger signals will usually be indicative of a poorly maintained or vulnerable control system: lines of organizational authority and responsibility are not clearly articulated or are nonexistent; internal control weaknesses detected are not acted upon in a timely fashion; and line supervisors ignore or do not adequately monitor control compliance.

The student disability resource center (SDRC) director stated that, in lieu of committee meetings, barrier removal and accessibility issues were communicated to his department, which, in turn, escalated the issues to other campus departments for resolution. He also stated that documentation to establish the new Advisory Committee on Services to Students with Disabilities was sent to the director of academic support programs who indicated that further action was pending due to the imminent arrival of the new campus president.

Failure to maintain an active and effective Advisory Committee on Services to Students with Disabilities increases the risk that campus programs, services, and activities will not be fully accessible to all individuals.

Recommendation 1

We recommend that the campus:

- a. Define, delegate, and document the authority of the new Advisory Committee on Services to Students with Disabilities, especially as it relates to resolving access and accommodations issues raised during the meetings.
- b. Implement monitoring controls to ensure regular meetings by committee members, timely resolution of noted accessibility issues, and effective communication of meeting results to responsible campus personnel.

Campus Response

We concur. The campus will define, delegate and document the authority of the new Advisory Committee on Services to Students with Disabilities. Oversight and monitoring controls will be implemented to ensure regular meetings take place, timely resolution of accessibility issues, and effective communication.

Implementation timeline: July 22, 2003.

DELEGATIONS OF AUTHORITY

Delegations of authority had not been documented for the student disability resource center (SDRC) director to approve the provision of services to disabled individuals and to the Americans with Disabilities Act (ADA) coordinator to perform assigned duties.

SAM §20050 states that the elements of a satisfactory system of internal accounting and administrative control include a system of authorization and record-keeping procedures.

The campus *Policy and Procedures for Accommodating Individuals with Disabilities*, P02-01, dated January 2002, states that accommodations will be made unless the director for diversity and compliance programs determines, after consultation with the appropriate administrator and the director of physical services and/or the director of information technology services, that such accommodation would impose an undue hardship on the university.

The *SDRC Summary of Services, Procedures, and Documentation Guidelines* state that the campus director of the program for services to students with disabilities or designee has the authority to verify a disability and approve the provision of services.

The SDRC director stated that the department's policy was derived from that of the CSU, and as such, he was not provided with a separate delegation of authority to verify disabilities and approve the provision of services. The director for diversity and compliance programs stated that since her recent hire at the campus, she has received a comprehensive job description and is waiting for other information that would include delegations of authority for assigned duties.

Internal control is compromised when delegations of authority are not fully documented.

Recommendation 2

We recommend that the campus:

- a. Document delegations of authority for individuals who approve the provision and declination of disability services and other related aspects of the overall disability support and accommodations (DSA) program.
- b. Implement a process to ensure that such delegations are appropriately maintained.

Campus Response

We concur. The campus will document delegations of authority for individuals to approve provision and declination of disability services and will implement a process to ensure these delegations are appropriately maintained.

Implementation timeline: July 22, 2003.

ADMINISTRATION OF MINOR CAPITAL OUTLAY FUNDS

Procedures had not been established to ensure executive campus management approval of minor capital outlay fund requests.

We found that minor capital outlay fund requests and interim substitutions were reviewed and approved by the Standing Committee on Space and Facilities without further escalation to the University Resource Planning and Budget Committee and/or the Executive Committee. This situation did not provide for executive campus management review and approval of minor capital outlay fund allocations, which included, but were not limited to, requests with ADA implications.

SAM §20050 states that the elements of a satisfactory system of internal accounting and administrative control include a system of authorization and record-keeping procedures.

The executive assistant to the president acknowledged this oversight and stated that minor capital outlay requests should be forwarded to executive campus management for review and approval.

Failure to obtain required approvals compromises internal controls and increases the risk of non-compliance with CSU, state, and federal regulations, negative publicity, and potential lawsuits.

Recommendation 3

We recommend that the campus implement procedures that ensure minor capital outlay fund requests and interim substitutions are reviewed and approved by executive campus management.

Campus Response

We concur. The campus will implement procedures to ensure minor capital outlay fund requests and interim substitutions are reviewed and approved by executive campus management.

Implementation timeline: April 30, 2003.

POLICIES AND PROCEDURES

Comprehensive policies and procedures were not in place for certain aspects of the disability support and accommodations (DSA) program.

We noted that:

- ▶ The campus grievance policy for students filing complaints other than discrimination or unprofessional conduct against faculty, staff, or administrators lacked various provisions that would help ensure prompt and equitable resolution of such complaints. Specifically, the policy did not include procedures for informing the complainant of the outcome of the complaint, including the corrective action taken, and the method for filing complaints against auxiliary organizations.
- ▶ Procedures for accepting, researching, and resolving informal complaints were not documented by the college of arts, humanities, and social services (CAHSS), college of natural resources and sciences (CNRS), housing and dining services, and extended education (EE).
- ▶ The SDRC had not documented policies and procedures for verifying student disabilities; documenting, verifying, and reporting temporary disabilities; declining disability support services; processing exam accommodation requests to respective faculty personnel; referral of students to the campus learning center; input of student disability information to the department's database and campus student record system, and the processing and retention of incomplete student disability files.

Code of Federal Regulations (CFR) Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.107, effective January 26, 1992, states that a public entity that employs 50 or more persons shall adopt and publish grievance procedures providing for prompt and equitable resolution of complaints alleging any action that would be prohibited by this part.

CSU directive AAES 89-07/BP 89-08, *Policy for the Provision of Services to Students with Disabilities*, dated January 9, 1989, states that disabled student services directors shall establish campus guidelines to implement the provision of services, and that students with disabilities denied a requested service may appeal the decision to the campus vice president or dean of student affairs, utilize the campus student grievance procedures, or utilize the Federal 504 grievance procedure. CSU directive AA 2002-35, *Policy for the Provision of Services to Students with Disabilities*, dated July 1, 2002, superseded this directive.

The executive assistant to the vice president of academic affairs stated that the campus and chancellor's office general counsel were currently revising the noted campus policy for student

complaints due to recent office of civil rights complaints involving student disability and equity issues. The responsible deans and program directors acknowledged that informal complaint procedures were not documented and stated that, in practice, student complaints were escalated to appropriate personnel within the college or department and that assistance from the SDRC director was typically sought to ensure effective resolution of the complaint.

Failure to develop, document, and communicate written policies and procedures increases the risk that disabled students will be not properly served and that misunderstandings will occur.

Recommendation 4

We recommend that the campus:

- a. Finalize and distribute the revised campus grievance policy for students filing complaints other than discrimination or unprofessional conduct against faculty, staff, or administrators.
- b. Document policies and procedures for departmental functions such as accepting, researching, and resolving student complaints received by the colleges and departments; verifying student disabilities; documenting, verifying, and reporting temporary disabilities; declining disability support services; processing exam accommodation requests to respective faculty personnel; referral of students to the campus learning center; input of student disability information to the department's database and campus student record system; and the processing and retention of incomplete student disability files.

Campus Response

We concur. The campus has issued University Management Letter 03-01, *Humboldt State University Nondiscrimination Policy and Procedures for Processing Discrimination Complaints*, to document the grievance policy for students filing complaints other than discrimination or unprofessional conduct against faculty, staff, or administrators. University Management Letter 03-01 documents the procedures for accepting, researching and resolving student complaints received by departments and colleges.

PROGRAM AND PHYSICAL ACCESSIBILITY

COMPUTER LABS AND WEBSITES

Campus computer labs, general computing areas, and websites were not fully accessible by all persons.

We noted that:

- ▶ Discipline-specific computing labs in the CAHSS and CNRS were not fully accessible by all persons. Specifically, designated accessible workstations were lacking computers and/or adjustable tables, and in certain labs, there was no designated accessible workstation for disabled persons. We also noted that responsibility for purchasing accessible workstations (which included computer hardware, assistive technology, and accessible tables and chairs), and monitoring all computing facilities for ongoing accessibility, was not clearly defined and documented in both colleges.
- ▶ There was no accessible workstation in the library's media lab or signage indicating where persons could seek assistance if needed. We also noted that the designated accessible workstations on the first and second floor did not include adjustable tables or assistive technology.
- ▶ Websites for five campus programs (CAHSS, CNRS, library, housing and dining services, and EE) were not fully accessible by all persons. We also noted that the campus *World Wide Web Policy* did not include provisions for web accessibility by disabled persons, and responsibility for this area had not been clearly defined.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.149, effective January 26, 1992, states that no qualified individual with a disability shall, because a public entity's facilities are inaccessible to or unusable by individuals with disabilities, be excluded from participation in, or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any public entity.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.160(a) and §35.160(b)(1), state that a public entity shall take appropriate steps to ensure that communications with applicants, participants, and members of the public with disabilities are as effective as communications with others, and furnish appropriate auxiliary aids and services where necessary to afford an individual with a disability an equal opportunity to participate in, and enjoy the benefits of, a service, program, or activity conducted by a public entity, respectively.

The campus *Policy and Procedures for Accommodating Individuals with Disabilities*, P02-01, dated January 2002, states that reasonable accommodation is any change in the work or educational environment, or the way things are customarily done within that environment, that enables an individual with a disability to have equal access to employment, educational opportunities, electronic information, and other programs or services offered by the university. Accommodations could include making existing facilities, services, and programs accessible for students, employees, and the general public; making Web-based, official university documents and services accessible; including Web pages associated with administration and services, course of instruction, departmental programs; and university-funded activities and groups.

The CAHSS information technology consultant stated that lab managers are responsible for ensuring accessibility in the labs; however, she was not aware of specific training or guidance in this area. She also stated that although she is responsible for the college home page, she has not received

training or guidance. The CNRS information technology consultant stated that although his area is responsible for installing specialized software in the labs, other campus computing departments are responsible for installing assistive technology. He also stated that monitoring of the college labs for accessibility is currently not performed, and responsibility for this area has not been clearly defined. He further stated that he is replacing a former employee who was responsible for ensuring web accessibility. The library chair acknowledged the importance of computer accessibility and stated that these exceptions were oversights. The directors of housing and dining services and EE also acknowledged the importance of web accessibility and stated that responsibility for this area has not been clearly defined on the campus.

Insufficient access to campus programs, services, activities, and communications increases the risk of regulatory scrutiny, potential lawsuits, and negative publicity.

Recommendation 5

We recommend that the campus:

- a. Define and document responsibilities to ensure computer labs and websites are fully accessible to all persons.
- b. Review and correct the accessibility issues noted in the computer labs, general areas, and websites cited above.

Campus Response

We concur. The campus will define and document responsibilities for ensuring computer labs and websites are fully accessible to all persons. In addition the campus will develop a plan and time schedule to review and correct accessibility issues noted in computer labs, general areas, and websites.

Implementation timeline: July 22, 2003.

SIGNAGE AND CAMPUS MAPS

Effective signage was not always in place, and a comprehensive campus map that included all accessible paths of travel and other accommodations for disabled persons had not been developed.

Our review of four campus programs (CAHSS, CRNS, library, and housing and dining services) disclosed that:

- ▶ Signage, including Braille-raised lettering, was not always in place at the Arthur Gist Hall, the Forestry building, library, and the Jolly Giant Commons. Specifically, we noted there was no signage that indicated accessible paths of travel from parking facilities to the building entrances and/or elevators; men's and women's restrooms; elevators; a book checkout counter; and telephones.

- ▶ The campus had not developed a comprehensive map that included all accessible paths of travel and other accommodations for disabled persons.
- ▶ Campus maps placed within metal podiums throughout the campus did not indicate the location of handicap and medical parking, Telecommunication Devices for the Deaf (TDD) telephones, handicap ramps, automated doors, and emergency phones.
- ▶ Responsibility for ensuring that signage, including the development and revision of campus maps, had not been clearly defined and documented.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.163(a) and (b), effective January 26, 1992, states that a public entity shall ensure that interested persons, including persons with impaired vision or hearing, can obtain information as to the existence and location of accessible services, activities, and facilities, and provide signage at all inaccessible entrances to each of its facilities, directing users to an accessible entrance or to a location at which they can obtain information about accessible facilities.

The campus *Policy and Procedures for Accommodating Individuals with Disabilities, P02-01*, dated January 2002, states that it is the policy of Humboldt State University to provide equal access and reasonable accommodation for individuals with disabilities to participate in any program, service, or opportunity provided by the campus. Accommodations could include making existing facilities, services, and programs accessible for students, employees, and the general public.

The construction manager of plant operations stated that signage is only created upon special request from campus departments and acknowledged that the responsibility for ensuring effective signage throughout the campus had not been defined. The SDRC director stated that his department developed a campus map that is given to students seeking disability support services; however, he indicated that other campus areas have developed maps that may not include all accessible paths of travel and accommodations for disabled persons.

Not providing sufficient signage and comprehensive campus maps increases the risk that campus programs, services, activities, and communications will not be fully accessible to all persons.

Recommendation 6

We recommend that the campus:

- a. Define and document responsibilities for the placement and maintenance of signage and maps throughout the campus.
- b. Review and correct the signage issues noted in the four programs detailed above.
- c. Develop a comprehensive map that includes all accessible paths of travel and other accommodations for disabled persons.

- d. Revise and replace the campus maps within the metal podiums that are placed throughout the campus.

Campus Response

We concur. The campus will 1) define and document responsibilities for the placement and maintenance of signage and maps throughout the campus; 2) develop a comprehensive map which includes all accessible paths of travel and other accommodations for disabled persons; 3) review and correct existing signage issues noted; and 4) revise and replace existing campus maps within the metal podiums.

Implementation Timeline: July 22, 2003.

TELEPHONES

Responsibility for determining the sufficiency and placement of Telecommunication Devices for the Deaf (TDD) telephones had not been defined and documented.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.161, effective January 26, 1992, states where a public entity communicates by telephone with applicants and beneficiaries, TDDs or equally effective telecommunication systems shall be used to communicate with individuals with impaired hearing or speech.

The manager of telecommunications and network services stated that TDD telephones are installed upon special request by campus departments; however, he was not aware of one person or department with compliance responsibilities for this area.

Not providing sufficient communication increases the risk that campus programs, services, activities, and communications will not be fully accessible to all persons.

Recommendation 7

We recommend that the campus define and document compliance responsibilities to ensure that a sufficient number of TDD telephones are maintained on the campus.

Campus Response

We concur. The campus will define and document compliance responsibilities to ensure that a sufficient number of TDD telephones are maintained on the campus.

Implementation Timeline: July 1, 2003.

PARKING

The campus methodology for implementing accessible parking stalls based on student and faculty need had not been officially approved and documented.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.149, effective January 26, 1992, states that no qualified individual with a disability shall, because a public entity's facilities are inaccessible to or unusable by individuals with disabilities, be excluded from participation in, or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any public entity.

The supervisor of parking and commuter services stated that due to the limited number of parking spaces on the campus, accessible parking stalls were implemented based on student and faculty need as determined by various campus departments.

Not providing sufficient handicap parking increases the risk that campus programs, services, and activities are not accessible to all persons.

Recommendation 8

We recommend that the campus review, approve, and document the current methodology for implementing accessible parking stalls, considering state, federal, and other compliance requirements.

Campus Response

We concur. The campus will review, approve and document the methodology for implementing accessible parking stalls in concert with state, federal and other applicable compliance requirements.

Implementation timeline: May 31, 2003.

UNIVERSITY CENTER

University center programs, services, and activities were not fully accessible.

We noted that:

- ▶ Computer workstations located on the second floor of the university center building were not fully accessible by all persons. Specifically, we noted that computers were placed on high counters, and a designated accessible workstation by the information booth was lacking a computer.
- ▶ Exterior signage was not in place either on or in front of the university center building to indicate accessible paths of travel, entrances, and the elevator.
- ▶ Interior signage and Braille-raised letters were not in place to indicate a TDD telephone and an accessible women's restroom on the second floor of the university center building.
- ▶ University center and center arts websites were not fully accessible by all persons.

- ▶ Center arts had not developed and documented informal complaint procedures for patrons of the program.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.149, effective January 26, 1992, states that no qualified individual with a disability shall, because a public entity's facilities are inaccessible to or unusable by individuals with disabilities, be excluded from participation in, or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any public entity.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.160(a) and §35.160(b)(1), state that a public entity shall take appropriate steps to furnish appropriate auxiliary aids and services where necessary to afford an individual with a disability an equal opportunity to participate in, and enjoy the benefits of, a service, program, or activity conducted by a public entity, respectively.

The university center operations manager stated that he routinely consults with the SDRC director regarding accessibility issues and indicated the noted exceptions were oversights.

Not providing access to all campus programs, services, activities, and communications increases the risk of regulatory scrutiny, potential lawsuits, and negative publicity.

Recommendation 9

We recommend that the campus:

- a. Review and correct the accessibility issues noted in the university center building.
- b. Review and correct the accessibility issues with university center and center arts websites.
- c. Develop and document policies and procedures for accepting, researching, and resolving patron complaints with the center arts program.

Campus Response

We concur. The campus will review and correct accessibility issues in the university center building including the center's and center arts' websites. Policies and procedures will also be developed to accept, review and resolve complaints related to the Center Arts Program.

Implementation Timeline: July 22, 2003.

THE VAN DUZER THEATRE

Certain accessibility issues were noted in the Van Duzer Theatre that required improvement.

We noted that:

- ▶ Responsibility for evacuating disabled persons from the Van Duzer Theatre had not been clearly defined.
 - There was no exterior signage on or in front of the building indicating accessible paths of travel from campus parking lots to the theatre entrance.
 - Viewing platforms were not incorporated into the design of the theatre, and there was no other accessible seating for disabled persons attending both the campus and center arts performances.

CFR Title 28, Part 35, *Nondiscrimination on the Basis of Disability in State and Local Government Service*, §35.149, effective January 26, 1992, states that no qualified individual with a disability shall, because a public entity's facilities are inaccessible to or unusable by individuals with disabilities, be excluded from participation in, or be denied the benefits of the services, programs, or activities of a public entity, or be subjected to discrimination by any public entity.

Executive Order (EO) No. 696, *Implementation of The California State University Emergency Preparedness Program*, dated January 29, 1999, states, in part, that each campus president is delegated the responsibility for the implementation of an emergency management system program on campus and shall ensure that management activities including, but not limited to, maintenance and regular updating of the institutional emergency management system plan and determination, acquisition, and maintenance of facilities, equipment, and related supplies required for emergency preparedness are accomplished.

The department chair of theatre, film, and dance stated that responsibility for implementing disaster evacuation procedures had not been clearly defined by campus management and he could not recall receiving any training in this regard. He further stated that the accessibility issues were due to a lack of funding.

Inadequate control over campus programs increases the risk of misunderstandings, regulatory scrutiny, potential lawsuits, and negative publicity.

Recommendation 10

We recommend that the campus:

- a. Fully define and document the responsibilities and training for the evacuation of disabled persons.
- b. Review and correct the accessibility issues noted with the Van Duzer Theatre.

Campus Response

We concur. The campus will define and document the responsibilities and training for the evacuation of disabled persons including reviewing and designing corrections for accessibility issues with the

Van Duzer Theatre.

Implementation Timeline: July 22, 2003.

DISASTER EVACUATION PLANS

Controls to ensure evacuation of disabled persons from the campus needed improvement.

The University Police department coordinated the survival actions for emergencies (S.A.F.E.) program and provided initial training to various campus departments in the most recent fiscal year. However, initial training had not been provided to all campus departments, and no building S.A.F.E. plans had been finalized.

EO No. 696, *Implementation of The California State University Emergency Preparedness Program*, dated January 29, 1999, states, in part, that each campus president is delegated the responsibility for the implementation of an emergency management system program on campus and shall ensure that management activities including, but not limited to, maintenance and regular updating of the institutional emergency management system plan and determination, acquisition, and maintenance of facilities, equipment, and related supplies required for emergency preparedness are accomplished.

The campus S.A.F.E. program states that the emergency manager will produce a S.A.F.E. plan document for the respective building S.A.F.E. response team and that a plan for the physically challenged employees, students, or visitors must be carefully considered.

The chief of university police stated that due to limited resources and other commitments, full implementation of the S.A.F.E. program that includes the development and testing of disaster evacuation plans had not been achieved. He acknowledged the importance of this issue and stated that S.A.F.E. training will resume in the last part of this year and steps will be taken to obtain final program plans from the departments.

Insufficient controls over disaster evacuation processes increase the risk of injury and potential liability to the campus.

Recommendation 11

We recommend that the campus take immediate steps to complete S.A.F.E. training and ensure that building plans are finalized.

Campus Response

We concur. The campus will take steps to complete S.A.F.E. training and ensure building plans are finalized.

Implementation Timeline: July 22, 2003.

PERSONNEL QUALIFICATIONS AND TRAINING

ADA TRAINING PLAN

The campus had not developed an ADA training plan for faculty, staff, and other individuals that work with disabled persons, and responsibility for this area had not been defined.

The Bureau of State Audits report, *CSU and UC: Campuses Generally Provide Access for Students with Disabilities*, dated November 24, 1995, states that to increase campus awareness of ADA requirements, the chancellor's office of the CSU should instruct its campuses to provide training classes or seminars for faculty and staff.

Although the campus had not documented a training plan, the SDRC director stated that efforts were made to provide faculty and staff with useful information for working with persons with disabilities. The executive assistant to the vice president of academic affairs acknowledged the lack of a defined training plan and stated that the new director of diversity and compliance programs would consider this issue.

Not maintaining an effective training plan increases the risk of noncompliance with federal, state, and CSU policies.

Recommendation 12

We recommend that the campus:

- a. Develop and document an ADA training plan for faculty, staff, and other persons to ensure sufficient understanding of student disability issues and campus-related support and accommodation services.
- b. Define responsibilities for this area to ensure timely execution of established training plans and ongoing compliance with the ADA and other related laws and regulations.

Campus Response

We concur. The campus will develop and document an ADA training plan for faculty, staff and other persons to ensure sufficient understanding of student disability issues and campus-related support and accommodation services. Responsibilities will be defined to ensure timely execution of training plans

and ongoing compliance with ADA and other related laws and regulations.

Implementation timeline: July 22, 2003.

CONTRACT INSTRUCTORS

Procedures had not been established to inform contract instructors of their ADA compliance responsibilities.

Contract instructors were hired for EE programs that were held both on the campus and at various off-site locations. We noted that:

- ▶ Procedures had not been established by EE to inform instructors of their ADA compliance responsibilities, which included, but were not limited to, providing reasonable accommodations in the classroom/meeting locations and evacuating disabled persons.
- ▶ The contract between EE and the instructors did not include provisions for ADA compliance.

The Bureau of State Audits report, *CSU and UC: Campuses Generally Provide Access for Students with Disabilities*, dated November 24, 1995, states that to increase campus awareness of ADA requirements, the chancellor's office of the CSU should instruct its campuses to provide training classes or seminars for faculty and staff.

CSU Policy Manual for Contracting and Procurement (Release 2.0) §228 states that all contracts must contain a condition stating that the contractor, by signing the contract, assures the university that it complies with the ADA of 1990, which prohibits discrimination on the basis of disability, as well as all applicable regulations and guidelines issued pursuant to the ADA.

The director of EE acknowledged the importance of training contract instructors and including ADA verbiage in related contracts and indicated these exceptions were oversights.

Insufficient control over contractor services increases the risk of noncompliance with CSU policies and state and federal regulations regarding disabled persons.

Recommendation 13

We recommend that the campus:

- a. Establish and implement procedures to inform instructors of their ADA responsibilities that would include, but not be limited to, providing reasonable accommodations in the classroom/meeting locations and evacuating disabled persons.
- b. Revise existing contracts with EE instructors to include provisions for ADA compliance.

Campus Response

We concur. The campus has established and implemented procedures to inform extended education instructors of their ADA responsibilities including revising the existing contract for extended education faculty to include provisions for ADA compliance.

Implementation timeline: Completed.

EMPLOYEE ACCOMMODATIONS

The administration of the campus employee accommodation program was in need of improvement.

Our review of six employee requests received by the Assistive Device Equipment Committee (ADEC) in fiscal years 2000/2001 and 2001/2002 disclosed that:

- ▶ There was no written evidence that all ADEC committee members evaluated and approved the funding of the six requests.
- ▶ Minutes of ADEC meetings were not always prepared by the chairperson or other designated personnel.

SAM §20050 states that the elements of a satisfactory system of internal accounting and administrative controls include a system of authorization and record-keeping procedures adequate to provide effective accounting control over assets, liabilities, revenues, and expenditures.

The assistant director of human resources and chairperson of the ADEC stated that all committee members were apprised of the employee requests and approval thereof was received via telephone calls or e-mails. He also stated that meetings were held in person only if there were multiple funding requests or if requests were problematic and acknowledged the importance of preparing meeting minutes.

Inadequate control over the administration of the employee accommodation program increases the risk of potential lawsuits, negative publicity, and poor employee morale.

Recommendation 14

We recommend that the campus strengthen controls to ensure that all disabled employee accommodation program requests are evaluated and approved by committee members and that meeting minutes are appropriately maintained.

Campus Response

We concur. The campus will strengthen controls to ensure all disabled employee accommodation program requests are evaluated and approved by committee members and that minutes of these meetings are appropriately maintained.

Implementation timeline: July 22, 2003.

DISABILITY VERIFICATION AND PROVISION OF SERVICES

Student disability files were not complete or properly documented.

A review of 20 disabled student files disclosed that:

- ▶ Various required documents were not always in file and signed and/or dated by the student and/or SDRC counselor or director. In certain instances, the documents in file were blank.
- ▶ Learning disability assessments were not always in file and were missing required information. We also noted that one assessment was partially complete.

SAM §20050 states that one element of a satisfactory system of internal administrative control is an effective system of internal review. Further, the *Standards for the Professional Practice of Internal Auditing*, issued by the Institute of Internal Auditors, defines internal control as a process designed to provide an organization reasonable assurance regarding the reliability and integrity of information.

The SDRC director stated that student files were not always reviewed for accuracy and completeness and acknowledged the need for additional staff training in this area.

Inadequate control over disability information increases campus liability due to the provision of inappropriate services.

Recommendation 15

We recommend that the campus develop procedures and monitoring processes to ensure that student disability records are properly completed.

Campus Response

We concur. The campus will develop procedures and monitor processes to ensure student disability records are properly completed.

Implementation Timeline: Completed.

FISCAL ADMINISTRATION

EQUIPMENT CONTROL

The SDRC did not maintain an inventory record of tape recorders and other equipment loaned to students.

SAM §20050 indicates that the elements of a satisfactory system of internal accounting and administrative controls include a system of authorization and record-keeping procedures adequate to provide effective accounting control over assets, liabilities, revenues, and expenditures.

The SDRC education resource assistant stated that equipment is tracked using checkout sheets that are signed by the students. She acknowledged the need to maintain a listing and took action to develop one during the audit.

Insufficient controls over equipment increase exposure to loss and/or misuse of state property.

Recommendation 16

We recommend that the campus strengthen controls over assistive equipment through effective monitoring and documentation of the loan process.

Campus Response

We concur. The campus has implemented additional procedures to document, track and monitor equipment loaned to students.

Implementation Timeline: Completed.

APPENDIX A: PERSONNEL CONTACTED

<u>Name</u>	<u>Title</u>
Rollin Richmond	President
Elizabeth Archibald	Office Manager, Student Disability Resource Center
Mark Baker	Construction Manager, Plant Operations
Randi Burke	Assistant to the Vice President, Student Affairs
Steven Butler	Vice President, Student Affairs
William Cannon	Director, Information Technology Services
John Cappacio	Director, Housing and Dining Services
Karen Carlton	Dean, College of Arts, Humanities, and Social Sciences
Carl Coffey	Interim Vice President for Development and Administrative Services
Patrick Collins	Information Technology Consultant, College of Natural Resources and Sciences
Tammy Curtis	Recruitment Manager, Human Resources
James Daniels	Director, Academic Support Programs
Nick DeRuyter	Manager, University Computer Services
Jean Eller	Education Resource Assistant, Student Disability Resource Center
John Erickson	Operations Manager, University Center
Robert Foster	Chief, University Police
Ronald Fritzsche	Executive Assistant to the Vice President, Academic Affairs
Roy Furshpan	Director, Center Arts
Esther Gilchrist	Office Manager, Human Resources
Michael Goodman	Chair, Theatre, Film, and Dance
Carl Hansen	Director, Extended Education
Dawn Hill	Director for Diversity and Compliance Programs
Debbie Hopkins	Construction Management Specialist, Plant Operations
Peter Johnson	Database Administrator, University Computer Services
Andrew Jones	Web Master, Community Relations
Sean Kearns	Director of University Communications, Community Relations
Ralph McFarland	Director, Student Disability Resource Center
James McHugh	Associate Professor, Theatre, Film, and Dance
Megan McKenzie	Information Technology Consultant, College of Arts, Humanities and Social Sciences
Timothy Moxon	Director, Plant Operations
Carolyn Mueller	Executive Assistant to the President
Betty Newman	Administrative Support Coordinator, Physical Services
Burt Nordstrom	Executive Director, University Center
Linda Parker	Administrative Support, Student Disability Resource Center
Phillip Perez	Physical Planner, Physical Services
Wayne Perryman	Chair, Library Access
Valgene Phillips	Associate Dean, College of Arts, Humanities, and Social Sciences
Robert Schulz	Director, Physical Services
Robert Seltzer	Assistant Director, Human Resources/ Chairperson, Assistive Device Equipment Committee
Cliff Shall	Manager, Telecommunications and Network Services
Steven Smith	Associate Dean, College of Natural Resources and Sciences

APPENDIX A

Steve Sullivan
Laurie Takao
Cassandra Tex

Supervisor, Parking and Commuter Services
Systems Manager, Academic Computing
Assistive Technology Specialist, Student Disability Resource Center



Vice President
Development & Administrative Services

February 25, 2003

Larry Mandel
University Auditor
The California State University
401 Golden Shore
Long Beach, CA 90802



RE: Disability Support and Accommodations Audit Report Number 02-39

Dear ~~Mr. Mandel:~~ *Larry*

Please find enclosed Humboldt State University's response to Audit Report Number 02-39 Disability Support and Accommodations at Humboldt State University. We appreciate the effort you and your staff have made to indicate areas where our processes and internal controls surrounding the disability support and accommodations program including compliance with relevant policies could be strengthened. The campus is committed to addressing and resolving the issues identified in the audit report.

Questions regarding the responses may be directed to Donna K. Sorensen, Director Fiscal Affairs, at 707-826-3521, or dks2@humboldt.edu.

Sincerely,

Carl Coffey
Interim Vice President for Development &
Administrative Services

Enclosure

- c: Rollin C. Richmond, President, w/o enclosure
- Rick Vrem, Interim Vice President for Academic Affairs, w/enclosure
- Steve Butler, Vice President, Student Affairs, w/enclosure
- Bill Cannon, Director, Information Technology Services, w/enclosure
- Robert Foster, Chief, University Police, w/enclosure
- Dawn Hill, Director, Diversity & Compliance Services, w/enclosure
- Ralph McFarland, Director, Student Disability Resource Center, w/enclosure
- Bob Schulz, Director Physical Services, w/enclosure
- Donna Sorensen, Director Fiscal Affairs, w/enclosure

**DISABILITY SUPPORT AND ACCOMMODATIONS
HUMBOLDT STATE UNIVERSITY**

REPORT NO. 02-39

PROGRAM ADMINISTRATION

ADVISORY COMMITTEE ON SERVICES TO STUDENTS WITH DISABILITIES

Recommendation 1

We recommend that the campus:

- a. Define, delegate, and document the authority of the new Advisory Committee on Services to Students with Disabilities, especially as it relates to resolving access and accommodations issues raised during the meetings.
- b. Implement monitoring controls to ensure regular meetings by committee members, timely resolution of noted accessibility issues, and effective communication of meeting results to responsible campus personnel.

Campus Response

We concur. The campus will define, delegate and document the authority of the new Advisory Committee on Services to Students with Disabilities. Oversight and monitoring controls will be implemented to ensure regular meetings take place, timely resolution of accessibility issues and effective communication.

Implementation timeline: July 22, 2003

DELEGATIONS OF AUTHORITY

Recommendation 2

We recommend that the campus:

- a. Document delegations of authority for individuals who approve the provision and declination of disability services and other related aspects of the overall disability support and accommodations (DSA) program.
- b. Implement a process to ensure that such delegations are appropriately maintained.

Campus Response

We concur. The campus will document delegations of authority for individuals to approve provision and declination of disability services and will implement a process to ensure these delegations are appropriately maintained.

Implementation timeline: July 22, 2003

ADMINISTRATION OF MINOR CAPITAL OUTLAY FUNDS

Recommendation 3

We recommend that the campus implement procedures that ensure minor capital outlay fund requests and interim substitutions are reviewed and approved by executive campus management.

Campus Response

We concur. The campus will implement procedures to ensure minor capital outlay fund requests and interim substitutions are reviewed and approved by executive campus management.

Implementation timeline: April 30, 2003

POLICIES AND PROCEDURES

Recommendation 4

We recommend that the campus:

- a. Finalize and distribute the revised campus grievance policy for students filing complaints other than discrimination or unprofessional conduct against faculty, staff, or administrators.
- b. Document policies and procedures for departmental functions such as accepting, researching, and resolving student complaints received by the colleges and departments; hiring auxiliary support staff; verifying student disabilities; documenting, verifying, and reporting temporary disabilities; declining disability support services; processing exam accommodation requests to respective faculty personnel; referral of students to the campus learning center; input of student disability information to the department's database and campus student record system; and the processing and retention of incomplete student disability files.

Campus Response

We concur. The campus has issued University Management Letter 03-01, Humboldt State University Nondiscrimination Policy and Procedures for Processing Discrimination Complaints, to document the grievance policy for students filing complaints other than discrimination or unprofessional conduct against faculty, staff, or administrators. University Management Letter 03-01 documents the procedures for accepting, researching and resolving student complaints received by departments and colleges.

Campus policies have also been implemented to verify student disabilities; document, verify and report temporary disabilities and decline disability support services.

Implementation timeline: Completed

The campus will continue to document policies and procedures relative to 1) processing exam accommodation requests to respective faculty personnel; 2) referral of students to the campus learning center; 3) inputting student disability information into the campus record system; and 4) processing and retention of incomplete student disability files.

Implementation timeline: July 22, 2003

PROGRAM AND PHYSICAL ACCESSIBILITY

COMPUTER LABS AND WEBSITES

Recommendation 5

We recommend that the campus:

- a. Define and document responsibilities to ensure computer labs and websites are fully accessible to all persons.
- b. Review and correct the accessibility issues noted in the computer labs, general areas, and websites cited above.

Campus Response

We concur. The campus will define and document responsibilities for ensuring computer labs and websites are fully accessible to all persons. In addition the campus will develop a plan and time schedule to review and correct accessibility issues noted in computer labs, general areas and websites.

Implementation timeline: July 22, 2003.

SIGNAGE AND CAMPUS MAPS

Recommendation 6

We recommend that the campus:

- a. Define and document responsibilities for the placement and maintenance of signage and maps throughout the campus.
- b. Review and correct the signage issues noted in the four programs detailed above.
- c. Develop a comprehensive map that includes all accessible paths of travel and other accommodations for disabled persons.

- d. Revise and replace the campus maps within the metal podiums that are placed throughout the campus.

Campus Response

We concur. The campus will 1) define and document responsibilities for the placement and maintenance of signage and maps throughout the campus; 2) develop a comprehensive map which includes all accessible paths of travel and other accommodations for disabled persons; 3) review and correct existing signage issues noted; and 4) revise and replace existing campus maps within the metal podiums.

Implementation Timeline: July 22, 2003

TELEPHONES

Recommendation 7

We recommend that the campus define and document compliance responsibilities to ensure that a sufficient number of TDD telephones are maintained on the campus.

Campus Response

We concur. The campus will define and document compliance responsibilities to ensure that a sufficient number of TDD telephones are maintained on the campus.

Implementation Timeline: July 1, 2003

PARKING

Recommendation 8

- a. We recommend that the campus review, approve, and document the current methodology for implementing accessible parking stalls, considering state, federal, and other compliance requirements.

Campus Response

We concur. The campus will review, approve and document the methodology for implementing accessible parking stalls in concert with state, federal and other applicable compliance requirements.

Implementation timeline: May 31, 2003

UNIVERSITY CENTER

Recommendation 9

We recommend that the campus:

- a. Review and correct the accessibility issues noted in the university center building.

- b. Review and correct the accessibility issues with university center and center arts websites.
- c. Develop and document policies and procedures for accepting, researching, and resolving patron complaints with the center arts program.

Campus Response

We concur. The campus will review and correct accessibility issues in the University Center building including the Center's and Center Arts' websites. Policies and procedures will also be developed to accept, review and resolve complaints related to the Center Arts Program.

Implementation Timeline: July 22, 2003

THE VAN DUZER THEATRE

Recommendation 10

We recommend that the campus:

Fully define and document the responsibilities and training for the evacuation of disabled persons.

- b. Review and correct the accessibility issues noted with the Van Duzer Theatre.

Campus Response

We concur. The campus will define and document the responsibilities and training for the evacuation of disabled persons including reviewing and designing corrections for accessibility issues with the Van Duzer Theatre.

Implementation Timeline: July 22, 2003

DISASTER EVACUATION PLANS

Recommendation 11

We recommend that the campus take immediate steps to complete S.A.F.E. training and ensure that building plans are finalized.

Campus Response

We concur. The campus will take steps to complete S.A.F.E. training and ensure building plans are finalized.

Implementation Timeline: July 22, 2003

PERSONNEL QUALIFICATIONS AND TRAINING

ADA TRAINING PLAN

Recommendation 12

We recommend that the campus:

- a. Develop and document an ADA training plan for faculty, staff, and other persons to ensure sufficient understanding of student disability issues and campus-related support and accommodation services.
- b. Define responsibilities for this area to ensure timely execution of established training plans and ongoing compliance with the ADA and other related laws and regulations.

Campus Response

We concur. The campus will develop and document an ADA training plan for faculty, staff and other persons to ensure sufficient understanding of student disability issues and campus-related support and accommodation services. Responsibilities will be defined to ensure timely execution of training plans and ongoing compliance with ADA and other related laws and regulations.

Implementation timeline: July 22, 2003

CONTRACT INSTRUCTORS

Recommendation 13

We recommend that the campus:

- a. Establish and implement procedures to inform instructors of their ADA responsibilities that would include, but not be limited to, providing reasonable accommodations in the classroom/meeting locations and evacuating disabled persons.
- b. Revise existing contracts with EE instructors to include provisions for ADA compliance.

Campus Response

We concur. The campus has established and implemented procedures to inform Extended Education instructors of their ADA responsibilities including revising the existing contract for Extended Education faculty to include provisions for ADA compliance.

Implementation timeline: Completed

EMPLOYEE ACCOMMODATIONS

Recommendation 14

We recommend that the campus strengthen controls to ensure that all disabled employee accommodation program requests are evaluated and approved by committee members and that meeting minutes are appropriately maintained.

Campus Response

We concur. The campus will strengthen controls to ensure all disabled employee accommodation program requests are evaluated and approved by committee members and that minutes of these meetings are appropriately maintained.

Implementation timeline: July 22, 2003

DISABILITY VERIFICATION AND PROVISION OF SERVICES

Recommendation 15

We recommend that the campus develop procedures and monitoring processes to ensure that student disability records are properly completed.

Campus Response

We concur. The campus will develop procedures and monitor processes to ensure student disability records are properly completed.

Implementation Timeline: Completed

FISCAL ADMINISTRATION

EQUIPMENT CONTROL

Recommendation 16

We recommend that the campus strengthen controls over assistive equipment through effective monitoring and documentation of the loan process.

Campus Response

We concur. The campus has implemented additional procedures to document, track and monitor equipment loaned to students

Implementation Timeline: Completed

THE CALIFORNIA STATE UNIVERSITY
OFFICE OF THE CHANCELLOR

BAKERSFIELD

April 8, 2003

CHANNEL ISLANDS

CHICO

MEMORANDUM

DOMINGUEZ HILLS

FRESNO

TO: Mr. Larry Mandel
University Auditor

FULLERTON

HAYWARD

FROM: Charles B. Reed
Chancellor

HUMBOLDT

LONG BEACH

SUBJECT: Draft Final Report Number 02-39 on *Disability Support and Accommodations*, Humboldt State University

LOS ANGELES

MARITIME ACADEMY

In response to your memorandum of April 8, 2003, I accept the response as submitted with the draft final report on *Disability Support and Accommodations*, Humboldt State University.

MONTEREY BAY

NORTHRIDGE

POMONA

CBR/bh

SACRAMENTO

Enclosure

SAN BERNARDINO

SAN DIEGO

cc: Dr. Rollin Richmond, President

SAN FRANCISCO

SAN JOSE

SAN LUIS OBISPO

SAN MARCOS

SONOMA

STANISLAUS